

REMARKS

After entry of this response, claims 1-20 remain pending in the present application. Applicant respectfully requests reconsideration by the Examiner in light of the following remarks.

I. Objections to drawings

The Examiner states that the drawings do not comply with 37 CFR 1.84 (p)(4). Applicant respectfully traverses.

With respect to Figure 1, Applicant has amended paragraph 21 of the specification to designate reference character “20” as referring to patient.

The Examiner objected to the drawings because reference character 390 in Figure 4 is described in the specification for Figure 5. Applicant has amended paragraph 32 of the specification to clarify that reference character 390 is described in the specification.

With respect to Figure 2, the Examiner asserts that the reference character “250 (Patient Education Program)” is not mentioned in the description. However, the submitted application does not include the reference character 250 nor does the specification contain the reference character 250. The block referred to as “Patient Education Program” is designated by reference character 220 both in the drawings and in the specification.

Further, the Examiner asserts that the reference characters 430, 440, 450, 470, 480 are not described in the specification for Figure 5. Applicant respectfully asserts that the aforementioned reference characters are fully described in the specification in compliance with 37 CFR 1.84(p)(5). The Examiner is directed to paragraphs 35, 37, and 38 which contain the description of the reference characters.

With respect to Figure 8, the Examiner asserts that the reference characters 420 and 550 are not described in the specification. Applicant respectfully asserts that the reference characters are fully described in amended paragraph 33 in compliance with 37 CFR 1.84(p)(5).

Based on the foregoing, Applicant respectfully requests withdrawal of the objection to the drawings.

II. Rejection Under 35 USC §103

A. The Jackson and Norris references

The Examiner has rejected Claims 1-9, 11-13, and 15-20 under 35 USC 103(a), as being unpatentable over Jackson, (U.S. Publication No. 2004/0078220 hereinafter “Jackson”) in view of Norris et al., (U.S. Patent No. 6,669,631 hereinafter “Norris”). Applicant respectfully traverses.

The Jackson reference, alone or in combination with other references, fails to teach or suggest among other things a physician portal to the central manager for providing the gathered information, obtaining diagnostic information, wherein the central manager retrieves selected educational content for delivery through the patient portal based on the physician’s diagnostic information as stated, for example, in Claim 1. The Jackson reference discloses a health care system that provides health care treatment, diagnosis, and or management. See e.g. abstract. Thus subsequent to reporting the signs and symptoms indicative of a need for medical treatment, the patient’s diagnosis and/or treatment are performed by the system. Paragraph [0072]. Furthermore, the diagnosis and/or treatment are based on the patient’s medical record and history. Paragraph [0078]. According to the abstract of the Norris reference, patient data is supplied to a patient file at a centralized information database and deep computing techniques are applied to mine the accessed statistical data to form a patient specific profile. Thus the Norris reference fails to cure the defects in the Jackson reference. The central manager of the present system obtains the diagnostic information from a physician. Obtaining the diagnostic information from the physician rather than the patient’s medical history facilitates treatment of new conditions, in addition to any pre-existing conditions in the patient’s history.

Moreover, contrary to the Examiner’s assertion, Norris fails to teach or suggest accessing medical educational content for a patient based on the physician diagnosis. Rather, the disclosure by the Norris reference teaches accessing statistical data from public domain databases and other databases for analysis and development of medical decision tools. See col. 11, lines 25-34. Providing the patient with medical education based on the physician’s diagnosis facilitates effective treatment and management of the patient’s condition.

Furthermore, with respect to Claim 6, the Jackson reference fails to teach or suggest among other things: a comprehensive system that receives diagnostic information through the physician portal from the physician based on the medical information and identifies educational content relevant to the diagnostic information. The Examiner's characterization of the Jackson reference on page 7 of the Office Action overlooks the express teachings of the reference. Paragraph [0081] clearly discloses that the treatment and/or diagnosis of the patient's medical symptoms and signs are performed by the system. Likewise, the Norris reference fails to cure the defects in the Jackson reference because it fails to teach receiving diagnostic information through the physician portal from the physician based on the medical information. Thus the Examiner's assertion that education information is provided to the patient based on the physician diagnosis is without merit because there is no teaching of providing a diagnosis to the system. Providing remote medical evaluations as stated, for example, in Claim 6 facilitates a comprehensive method of interaction between the physician and the patient, while also providing the patient with the relevant educational information.

Accordingly, the rejection of Claims 1-9, 11-13, and 15-20 under 35 U.S.C. 103(a) as unpatentable over Jackson in view of Norris is without merit and must be withdrawn.

B. The Jackson, Norris, and WebMD references

The Examiner has rejected Claim 10 under 35 USC 103(a), as being unpatentable over Jackson, in view of Norris and further in view of www.WebMD.com (November, 2002) [hereinafter "WebMD"]. In the rejection, Jackson is the primary reference and is applied in the same manner as applied against Claim 6. Claim 10 properly depends from Claim 6 and being a dependent claim is allowable therewith.

Furthermore, WebMD fails to teach a method of identifying educational content relevant to the diagnostic information provided by the physician. Rather, WebMD discloses a collection of educational content on diverse topics and there is no teaching or suggestion of retrieving educational information that is patient specific based on the physician diagnosis. Providing educational information that

is both relevant in content and in time relative to the patient's current condition prevents patient overload, makes the content user friendly, and promotes efficiency in management of the condition.

Accordingly, the rejection of Claim 10 under 35 U.S.C. 103(a) as unpatentable over Jackson in view of Norris and further in view of WebMD is without merit and must be withdrawn.

The Jackson, Norris, and Lin references

The Examiner has rejected Claim 14 under 35 USC 103(a), as being unpatentable over Jackson, in view of Norris and further in view of Lin et al., 20 *E-healthcare: A vehicle of change*, AMERICAN BUSINESS REVIEW, 2, 27, (West Haven June 2002). In the rejection, Jackson is the primary reference and is applied in the same manner as applied against Claim 6. Claim 14 properly depends from Claim 6 and being a dependent claim is allowable therewith.

Furthermore, the Lin reference fails to cure the deficiency in the other references failure to teach or suggest a method of providing customer loyalty through the physician portal. Lin discloses a system that generates customer (patient) loyalty through the accuracy of information, product quality or medical advice from the physician. It is illogical to assert that the physician's loyalty would be provided by the accuracy of information, product quality or medical advice, because after all the information disclosed in Lin is derived from the physician. Claim 14 provides the physician's customer loyalty by providing information intended to make use of the physician portal more attractive and invite more frequent usage beyond the usual interaction with the patient and diagnosis database.

Accordingly, the rejection of Claim 14 under 35 U.S.C. 103(a) as unpatentable over Jackson in view of Norris and further in view of Lin is without merit and must be withdrawn.

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III. Conclusion

In view of the foregoing, it is submitted that this application is in condition for allowance. Favorable consideration and prompt allowance of the application are respectfully requested.

The Examiner is invited to telephone the undersigned if the Examiner believes it would be useful to advance prosecution.

Respectfully submitted,

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Date

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